

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>BA</i>	<i>20381</i>	
O.I.P.E. CLASSIFIER	<i>MTN</i>	<i>50</i>	<i>10-7-06</i>
FORMALITY REVIEW	<i>W</i>	<i>61227</i>	<i>11-17-02</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
Final	
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here

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JCS15 U.S. PTO  
NO/666660

(Re)